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12/18/01

Commissioner for Patents Washington, DC 20231

Sheet 1 of 2

Title:

ATTN: BOX PATENT APPLICATION

UTILITY
PATENT APPLICATION

TRANSMITTAL

Docket No.: 01-447

Date: I

December 18, 2001

U.S. Express Mail Label No.: EVO
Inventor Name(s):

EV018463984US

11050 U.S. P. 10/024413

JAMES J. KALAFUT AND WILLIAM E. ALLEN

| | VERAGE | SEUDOLITE LOCATIONS BASED ON PREDICTED |
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| x | Fee Transmittal Form A | attached in Duplicate |
| x | Specification and Claim | (s) [Total Pages 21] |
| X | Drawing(s) | [Total Sheets 10] |
| | FORMAL | |
| Declar | ration | [Total Pages 1] |
| | x Newly Executed | l (Original or Copy) |
| | Copy From Prior | or Application (37 CFR § 1.63(d)) |
| | | of Inventor(s) (37 CFR § 1.63(d)(2)) Statement Attached) |
| | Assignment Papers (Co | ver Sheet and Document(s)) |
| | 37 CFR § 3.73(b) States | ment (if applicable) |
| | English Translation Doo | cument (if applicable) |
| x | Information Disclosure | Statement (IDS)/PTO-1449 |
| | X Copies of IDS C | Citations |
| | Preliminary Amendmen | t |
| X | Return Receipt Postcard | d (Specifically Itemized) |
| | Certified Copy of Priori | ty Document(s) |
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PTO/SB/17 (10-01)

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| TOTAL AMOUNT OF PAYMENT |
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| Complete if Known | | | | |
|----------------------|-------------------------|--|--|--|
| Application Number | (Unassigned) | | | |
| Filing Date | (Herewith) | | | |
| First Named Inventor | James J. Kalafut ET AL. | | | |
| Examiner Name | (Unassigned) | | | |
| Group Art Unit | (Unassigned) | | | |
| Attorney Docket No. | 01-447 | | | |

| METHOD OF PAYMENT FEE CALCULATION (continu | FEE CALCULATION (continued) | | | | |
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| 1. X The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to: 3. ADDITIONAL FEES | | | | | |
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| Applicant daims small entity status. 139 130 139 130 Non-English specification | | | | | |
| See 37 CFR 1.27 147 2,520 147 2,520 For filing a request for ex parte res | examination | | | | |
| 2. Payment Enclosed: 112 920° 112 920° Requesting publication of SIR prior | | | | | |
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| FEE CALCULATION 113 1,840* 113 1,840* Requesting publication of SIR afte Examiner action | ' | | | | |
| 1. BASIC FILING FEE 115 110 215 55 Extension for reply within first mor | nth | | | | |
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| 106 330 206 165 Design filing fee | th | | | | |
| 107 510 207 255 Plant filing fee 119 320 219 160 Notice of Appeal | | | | | |
| 108 740 208 370 Reissue filing fee 120 320 220 160 Filing a brief in support of an appear | al | | | | |
| 114 160 214 80 Provisional filing fee 121 280 221 140 Request for oral hearing 138 1,510 138 1,510 Petition to institute a public use pri | diag | | | | |
| SUBTOTAL (1) (\$) 740 138 1,510 Petition to institute a public use pro | oceeding | | | | |
| 2. EXTRA CLAIM FEES 141 1,280 241 640 Petition to revive - unintentional | | | | | |
| Fee from below Fee Paid 142 1,280 242 640 Utility issue fee (or reissue) | | | | | |
| Total Claims 22 -20** = 2 X 18 = 36 143 460 243 230 Design issue fee | | | | | |
| Independent 5 - 3** = 2 x 84 = 168 144 620 244 310 Plant issue fee | | | | | |
| Multiple Dependent = 122 130 122 130 Petitions to the Commissioner | | | | | |
| 123 50 123 50 Processing fee under 37 CFR 1.17 | (q) | | | | |
| Large Entity Small Entity Fee Fee Fee Fee Description 126 180 126 180 Submission of Information Disclosu | ire Stmt | | | | |
| Code (\$) Code (\$) 103 18 203 9 Claims in excess of 20 581 40 581 40 Recording each patent assignment property (times number of properties) | | | | | |
| | , | | | | |
| 102 84 202 42 Independent claims in excess of 3 146 740 246 370 Filing a submission after final reject (37 CFR § 1.129(a)) | | | | | |
| 109 84 209 42 **Reissue independent claims 149 740 249 370 For each additional invention to be examined (37 CFR § 1.129(b)) | | | | | |
| over original patent | | | | | |
| 110 18 210 9 ** Reissue claims in excess of 20 and over original patent 179 740 279 370 Request for Continued Examination | ` ' — | | | | |
| of a design application | ` | | | | |
| SUBTOTAL (2) (\$) 204 Other fee (specify) | | | | | |
| **or number previously paid, if greater; For Reissues, see above *Reduced by Basic Filing Fee Paid SUBTOTAL (3) | (\$) | | | | |

| SUBMITTED BY | | | | | | Complete (ii | applicable) |
|-------------------|----------|-----------|-------|------------------|--------|--------------|----------------|
| Name (Print/Type) | Steve D. | Lyndguist | 1. | Registration No. | 42,816 | Telephone | (314) 849-4079 |
| Signature | 1 | tal Juna | gen 2 | 3 | | Date | 12/18/2001 |

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